



State Employee Health Plan HealthyKIDS Program

HealthyKIDS (Kansas employees Insurance for Dependents Supplement) is a pilot program that helps eligible state employees with the cost of premiums for their children's health insurance coverage under the State Employee Health Plan (**SEHP**).

Eligible State employees with dependent children will have 90% of the premium for their covered children paid for by the state instead of the traditional 55%. The employee will pay for the remaining 10%. Employees may enroll in any of the available plan options. The state contribution will be based on the lowest cost plan.

If you cannot qualify for Kansas HealthWave (Title 21) because you are a state employee, you may qualify for HealthyKIDS if your household size and income fall within the guidelines below.

To use the chart below, count yourself **and** your spouse if living in the same household. Also, count your children under 19 who live with you, including adoptive children and minors for whom you have legal custody.

| Household Gross Income Effective May 1, 2014 | | |
|-------------------------------------------------------------------------|---------------|----------------|
| Household Size | Annual Income | Monthly Income |
| 2 | \$38,868 | \$3,239 |
| 3 | \$48,912 | \$4,076 |
| 4 | \$58,932 | \$4,911 |
| 5 | \$68,952 | \$5,746 |
| 6 | \$78,996 | \$6,583 |
| 7 | \$89,016 | \$7,418 |
| If more than 7, add \$838 to monthly income for each additional member. | | |



IF YOU BELIEVE YOU MAY BE ELIGIBLE FOR THE HealthyKIDS Program:

Enroll online anytime at <https://khap.kdhe.state.ks.us/hkapplication> or during Open Enrollment, when making your health plan and coverage tier selections through the **Employee Service Center** at www.kansas.gov/employee.

After enrolling online, you will receive a letter stating whether or not your application was approved. **If approved**, your premium cost will be adjusted in either the next pay period, or if you enrolled during the Open Enrollment period, in January when the new plan year begins.

If your application is denied and you would like to remove your dependents from your health insurance, you must complete a Change Form and submit it to your agency Human Resource office **no later than December 15th**, if applying during Open Enrollment, **or within 31 days of your denial letter** if applying mid-year due to a qualifying event.

**NOTE: THE COVERAGE TIER MAY BE CHANGED, BUT THE MEDICAL PLAN CANNOT.
PLEASE WRITE "DENIAL OF HEALTHYKIDS" ON THE CHANGE FORM.**